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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/661,034
Filing Date	9/12/03
First Named Inventor	Clifford A. Davidow
Art Unit	2661
Examiner Name	Unknown
Attorney Docket Number	PowerWAN-007

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Moses Joseph		
Address	PowerWAN, Inc. 2445 Faber Place, Suite 100		
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Signature			
Name	Bruce E. Garlick	Registration No.	36,520
Date	January 28, 2005	Telephone No.	(512) 264-8816

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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